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# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kennedy, Joseph, P., III		
(b) Address (number and street) PO BOX 590464		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Newton MA 02459		2. Candidate's FEC Identification Number H2MA04073
4. Party Affiliation DEMOCRATIC PARTY		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)
5. Office Sought House	6. State & District of Candidate MA 04	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Joe Kennedy for Congress		
(b) Address (number and street) PO BOX 590464		
(c) City, State, and ZIP Code Newton MA 02459		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Joe Kennedy Victory Fund 2018		
(b) Address (number and street) 430 South Capitol St SE 2nd Fl		
(c) City, State, and ZIP Code Washington DC 20003		

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

Signature of Candidate Kennedy, Joseph, P., III	Date 03/28/2017
[Electronically Filed]	

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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